

420278

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL001140	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/05/2015
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

CREEKVIEW FAMILY CARE HOME

3524 DICKEY MILL ROAD
MEBANE, NC 27302

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{C 000}	Initial Comments Report by Paul Dixon A Biennial Follow-Up Survey was conducted on May 5, 2015 from 8:25 AM to 8:45 AM. None of the previously cited deficiencies have been corrected; therefore further action is required.	{C 000}		
{C 153}	Houskeeping And Furnishings-Clean, Repaired SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: In the Kitchen, the cabinet to the left of the range is missing the bottom drawer. Locate and install the missing drawer. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction. 05/05/2015-PD: Observations during the Follow-Up Survey indicated that the drawer is still missing. Locate and install the missing drawer. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.	{C 153}		
{C 174}	Building Equipment Maintained Safe, Operating	{C 174}		



Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Martha Tucker for Laurinda Ray

TITLE

S.I.C.

(X6) DATE

8-5-15

STATE FORM

6899

GJ5Y22

If continuation sheet 1 of 4

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER CREEKVIEW FAMILY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 3524 DICKEY MILL ROAD MEBANE, NC 27302		
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{C 174}	<p>Continued From page 1</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes.</p> <p>This Rule is not met as evidenced by: 1. The toilet in the rear hall bathroom is loose. Have a qualified individual install a new wax seal and re-install the toilet so that it does not move. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>05/05/2015-PD: Observations during the Follow-Up Survey showed that the toilet is still loose. Have a qualified technician install a new wax seal and re-install the toilet so that it does not move. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>2. The kitchen range hood is missing two (2) light bulbs, the filter is missing, and the fan is very greasy and turning slowly. Have a qualified technician investigate and repair the fan. Have the range hood cleaned and install a grease filter. Install 2 working light bulbs in the range hood. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>05/05/2015-PD: Observations during the</p>	{C 174}		

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{C 174}	<p>Continued From page 2</p> <p>Follow-Up Survey showed that the range hood is still missing 2 bulbs, the filter is missing, and the fan is not working correctly. Have a qualified technician investigate and repair the fan. Have the range hood cleaned and install a grease filter. Install 2 working light bulbs in the range hood. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>3. The light fixture in the Den is missing a bulb. Install a working light bulb in the fixture. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>05/05/2015-PD: Observations during the Follow-Up Survey showed that the light fixture is still missing a bulb. Install a working light bulb in the fixture. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>4. The light fixture in the Staff Office is missing a bulb. Install a working light bulb in the fixture. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>05/05/2015-PD: Observations during the Follow-Up Survey showed that the light fixture is still missing a bulb. Install a working light bulb in the fixture. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p>	{C 174}		

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